



Massachusetts Department of Environmental Protection
Bureau of Waste Prevention – Hazardous Waste – Licensing and Engineering Branch
BWP HW 07 Approval of Hazardous Waste Treatability Studies
Instructions and Supporting Materials

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Introduction

DEP *Permit Applications*, as well as *Instructions & Support Materials*, are available for download from the DEP Web site at mass.gov/dep in two file formats: Microsoft Word and Adobe Acrobat PDF. Either format allows documents to be printed.

Instructions & Support Materials files in Microsoft Word format contain a series of documents that provide guidance on how to prepare a permit application. Although we recommend that you print out the entire package, you may choose to print specific documents by selecting the appropriate page numbers for printing.

Permit Applications in Microsoft Word format must be downloaded separately. Users with Microsoft Word 97 or later may complete these forms electronically.

Permitting packages in Adobe Acrobat PDF format combine *Permit Applications* and *Instructions & Support Materials* in a single document. Adobe Acrobat PDF files may only be viewed and printed without alteration. *Permit Applications* in this format may not be completed electronically.



Massachusetts Department of Environmental Protection
Bureau of Waste Prevention – Hazardous Waste – Licensing and Engineering Branch
BWP HW 07 Approval of Hazardous Waste Treatability Studies
Permit Fact Sheet

1. What is the purpose of this approval?

This approval authorizes and sets conditions for persons intending to conduct treatability studies using samples of hazardous waste generated on-site or collected from off-site. Treatability studies are conducted to obtain engineering and economic evaluations of treatment processes and equipment.

Treatability studies also include toxicological and health effects studies and studies of a hazardous waste's compatibility with liners or storage material.

The operation of treatment equipment or processes proven to be effective on a specific waste will help prevent the discharge of hazardous waste to the environment.

Legislative authority for these permits is stated in MGL Chapter 21C, sections 4 and 6. Regulatory authority is found at 310 CMR 30.099(23) and 30.104(19).

2. Who must apply?

Any one wishing to conduct a treatability study must apply for this permit. The types of firms that typically apply include manufacturers of treatment equipment, facilities that treat, store or dispose of hazardous waste, laboratories, consulting engineering and research companies, and universities.

3. What other requirements should be considered when applying for this approval?

a. What prerequisites should be considered before applying for this approval?

Important: The applicant should contact the Licensing and Engineering Branch (of Hazardous Waste, 617-292-5853) and request an informational meeting with the staff in Boston for guidance in preparing the application.

b. What concurrent applications are related to this approval?

Depending on the treatment process or equipment, additional permits or approvals may be required from DEP or local authorities. For example, air or water permits may be required if the treatment involves potential discharges to the environment. Contact the Licensing and Engineering Branch for more information.

4. What is the application fee?

The application fee is \$2,195.

5. What is the Primary Permit Location?

PRIMARY PERMIT LOCATION (original and 2 copies)
Department of Environmental Protection
Hazardous Waste
1 Winter Street
Boston, MA 02108
Attention: Permit Administrator

What is the Reserve Copy Location?

RESERVE COPY LOCATION
None



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6. What are the timelines?

As of July 1, 1992 the timelines are:

	AC	T1	T2*
BWP HW 07	30	45	45

*A second technical review will only be conducted if necessary.

7. What is the annual compliance fee?

There is no annual compliance fee for this approval.

8. How long is this approval in effect?

This approval is in effect until the laboratory or testing facility notifies the Department by letter that it is no longer conducting treatability studies.

9. How can I avoid the most common mistakes made in applying for this approval?

- The applicant should be sure to obtain an up-to-date edition of the Hazardous Waste Management Regulations (310 CMR 30.000). The provisions governing treatability studies (310 CMR 30.099(23) and 30.104(19)) should be reviewed carefully.
- The applicant should request an informational meeting with the Licensing and Engineering Branch in Boston before the applicant begins to prepare the application.
- The applicant should follow DEP's Treatability Studies Application Checklist, which is attached to this application kit.
- Submit fee and *one* page of the DEP Transmittal Form to: Department of Environmental Protection, P. O. Box 4062, Boston, MA 02211.

10. What are the regulations that apply to this approval? Where can I get copies?

These regulations include, but are not limited to:

- Hazardous Waste Regulations, 310 CMR 30.000.
- Timely Action and Fee Provisions, 310 CMR 4.00.
- Administrative Penalty Regulations, 310 CMR 5.00.

These may be purchased at:

State House Bookstore
Room 116
Boston, MA 02133
617-727-2834

State House West Bookstore
436 Dwight Street
Springfield, MA 01103
413-784-1376



Massachusetts Department of Environmental Protection
Bureau of Waste Prevention – Hazardous Waste – Licensing and Engineering Branch
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Application Completeness Checklist

- ☐ Meeting with Boston Licensing and Engineering staff to discuss application has been held. Call 617-292-5853 to set up meeting.
- ☐ The DEP Transmittal Form is completed.
- ☐ DEP Application Form BWP HW 07 is completed and included with the application package.
- ☐ DEP Treatability Studies Checklist is completed and included with the application package.

To submit the application package:

- ☐ Checklist items have been completed.
- ☐ Send original and two copies of the application along with *one* page from the DEP Transmittal Form to:

Department of Environmental Protection
Hazardous Waste
1 Winter Street
Boston, MA 02108
Attn: Permit Administrator

- ☐ Send fee of \$2,195 in the form of a check or money order made payable to *Commonwealth of Massachusetts*, along with *one* page from the DEP Transmittal Form to:

Department of Environmental Protection
P.O. Box 4062
Boston, MA 02211



Massachusetts Department of Environmental Protection

Addresses and Phone Numbers

DEP Boston
One Winter Street
Boston, MA 02108
Telephone: (617) 292-5500
Fax: (617) 556-1049
TDD: (617) 574-6868

William X. Wall Experiment Station
37 Shattuck Street
Lawrence, MA 01843
Fax: (978) 688-0352
Division of Environmental Analysis
Telephone: (978) 682-5237
Air Quality Surveillance
Telephone: (978) 975-1138

Office of Watershed
Management
627 Main Street
Worcester, MA 01608
Telephone: (508) 792-7470
Fax: (508) 839-3469

Millbury Training Center
Route 20 Millbury, MA 01527
Telephone: (508) 368-5600
Fax: (508) 755-9253
Residuals Sludge Management
Telephone: (508) 368-5606
WWT Operator Certification
Telephone: (508) 368-5698

DEP Western Region
436 Dwight Street
Suite 402
Springfield, MA 01103
Phone: (413) 784-1100
Fax: (413) 784-1149



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DEP Central Region
627 Main Street
Worcester, MA 01608
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Fax: (508) 792-7621
TDD: (508) 767-2788



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Uxbridge
Warren
Webster
Westborough
West Boylston
West Brookfield
Westford
Westminster
Winchendon
Worcester

DEP Southeast Region
20 Riverside Drive
Lakeville, MA 02347
Phone: (508) 946-2700
Fax: (508) 947-6557
TDD: (508) 946-2795



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Wrentham
Yarmouth

DEP Northeast Region
1 Winter Street
Boston, MA 02108
Phone: 617-654-6500



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Massachusetts Department of Environmental Protection
Bureau of Waste Prevention – Hazardous Waste

BWP HW 07 Application for approval to Conduct
Treatability Studies

Transmittal Number # _____

Facility ID (if known) _____

Treatability Studies Summary

A. Application Information

Important:
When filling out
forms on the
computer, use
only the tab key
to move your
cursor - do not
use the return
key.



1. _____
Name of Applicant Company
2. _____
EPA Identification Number (if a number has been applied for, but not yet received, write 'PENDING')
3. Specify the applicant company's business organization:
☐ Sole Proprietorship ☐ Cooperation ☐ Partnership ☐ Other (specify): _____
4. Specify the status of the applicant's business:
☐ Private ☐ Public ☐ Other (specify): _____

B. Proposed Activities Summary

1. Provide a complete description of all proposed activities in Massachusetts. (use additional sheets if necessary.)

C. Required Attachments

The applicant must complete and submit the information described in the **Treatability Studies checklist**. No application is complete without the information described in the **Treatability Studies checklist**.

Has all the required information been submitted?

☐ Yes

☐ No



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Treatability Studies Summary

D. Confidentiality Request

You may request the Department to keep confidential part or all of any documentary material or data submitted to the Department is such material or data, if made public, would divulge a trade secret.

You are advised to read 310 CMR 3.00 carefully before making such a request because only certain material or data may properly be the subject of a request for confidentiality.

E. Certification

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information. I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including possible fines and imprisonment.

Print Name

Authorized Signature

Position/Title

Date



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Bureau of Waste Prevention – Hazardous Waste

Treatability Studies Checklist

Important:
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



Application Requirements	310 CMR 30.000 Reference Section	Subject Requirements	Provided	Location Application
30.104(19)(a)1		Property Owner	<input type="checkbox"/>	<input type="checkbox"/>
		Address	<input type="checkbox"/>	<input type="checkbox"/>
		Comments and/or Notes		
30.104(19)(a)2		Owner/Operator	<input type="checkbox"/>	<input type="checkbox"/>
		Address	<input type="checkbox"/>	<input type="checkbox"/>
		Comments and/or Notes		
30.104(19)(a)3		Name and telephone number of the individual responsible for supervising all treatability studies.	<input type="checkbox"/>	<input type="checkbox"/>
		Comments and/or Notes		
30.104(19)(a)4		Operations Plan:		
		Site Plan/Map Scale, topographic contours or elevations, buildings, normal and emergency roads and access to facility, drainage features - i.e. catch basins, fence and property lines.	<input type="checkbox"/>	<input type="checkbox"/>
		Comments and/or Notes		
30.104(19)(a)4.a		Written description of all:		
		Hazardous Waste Storage Areas:	<input type="checkbox"/>	<input type="checkbox"/>
		Include floor plan, location of floor drains, compatible and incompatible storage areas, berms, safety equipment (fire, telephones, etc.) emergency switches and valves).		
		Comments and/or Notes		
		Describe materials of construction, i.e. roof, walls, floor.	<input type="checkbox"/>	<input type="checkbox"/>
		Comments and/or Notes		
		Describe method and equipment to be used to handle hazardous waste in containers and tanks. (Receive, store, move, ship)	<input type="checkbox"/>	<input type="checkbox"/>
		Comments and/or Notes		



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Treatability Studies Checklist

Application Requirements	310 CMR 30.000 Reference Section	Subject Requirements	Provided	Location Application
30.104(19)(a)4.b		All hazardous waste treatment and sample analysis areas: Include floor plan, location of floor drains, treatment equipment, sample analysis area, safety equipment (fire, telephones, etc.) emergency switches and valves.	<input type="checkbox"/>	<input type="checkbox"/>
			<hr/> Comments and/or Notes	
		Describe materials of construction i.e. roof, walls, floor.	<input type="checkbox"/>	<input type="checkbox"/>
			<hr/> Comments and/or Notes	
30.104(19)(a)4.c		All hazardous wastes to be stored and treated or analyzed including chemical name and waste codes.	<input type="checkbox"/>	<input type="checkbox"/>
			<hr/> Comments and/or Notes	
30.104(19)(a)4.d		All hazardous waste treatment processes: Include simplified process flow diagram for each treatment unit showing major components and location and types of all safety devices such as relief valves, control valves, etc.	<input type="checkbox"/>	<input type="checkbox"/>
			<hr/> Comments and/or Notes	
		Description of the process flow diagram addressing the following:		
		i. transfer of hazardous waste from containers or tanks to treatment units.	<input type="checkbox"/>	<input type="checkbox"/>
			<hr/> Comments and/or Notes	
		ii. function of each major component shown on the process flow diagram. Include the normal and maximum levels of temperature and pressure.	<input type="checkbox"/>	<input type="checkbox"/>
			<hr/> Comments and/or Notes	
		iii. transfer of recovered effluents and hazardous waste from treatment unit to containers or tanks.	<input type="checkbox"/>	<input type="checkbox"/>
			<hr/> Comments and/or Notes	
		iv. procedures for emergency shutdown.	<input type="checkbox"/>	<input type="checkbox"/>
			<hr/> Comments and/or Notes	



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Treatability Studies Checklist

Application Requirements	310 CMR 30.000 Reference Section	Subject Requirements	Provided	Location Application
30.104(19)(a)4.e		Procedures for obtaining detailed chemical and physical analyses of representative samples of waste prior to receipt of hazardous waste for treatability studies.	<input type="checkbox"/>	<input type="checkbox"/>
Comments and/or Notes				
30.104(19)(a)4.f		Chemical and physical screening methods used to verify that hazardous waste received from off-site generators is as described in 30.104(19)(a)4.e above.	<input type="checkbox"/>	<input type="checkbox"/>
Comments and/or Notes				
30.104(19)(a)5	30.351(8)	Certification of compliance with small quantity generator requirements governing waste accumulation.	<input type="checkbox"/>	<input type="checkbox"/>
Comments and/or Notes				
	30.351(9)	Certification of compliance with requirements governing emergency procedures, prevention and response.	<input type="checkbox"/>	<input type="checkbox"/>
Comments and/or Notes				
30.104(19)(a)6	30.807(1)	Signature of responsible:		
		Corporate Officer	<input type="checkbox"/>	<input type="checkbox"/>
Comments and/or Notes				
		Corporate Seal	<input type="checkbox"/>	<input type="checkbox"/>
Comments and/or Notes				
	30.009	Required certification	<input type="checkbox"/>	<input type="checkbox"/>
Comments and/or Notes				
30.104(19)(a)7		Listing and status of all required permits or construction approvals for treatability activity.	<input type="checkbox"/>	<input type="checkbox"/>
Comments and/or Notes				
30.104(19)(a)8		Description of introductory and continuing training programs. Emphasize hazardous waste management, treatment and emergency procedures.	<input type="checkbox"/>	<input type="checkbox"/>
Comments and/or Notes				
		Documentation of all training given and intended to be given to each employee.	<input type="checkbox"/>	<input type="checkbox"/>
Comments and/or Notes				



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Treatability Studies Checklist

Application Requirements	310 CMR 30.000 Reference Section	Subject Requirements	Provided	Location Application
30.104(19)(a)9	30.585	Required certification concerning written decontamination procedures for mobile treatment units.	<input type="checkbox"/>	<input type="checkbox"/>
			Comments and/or Notes	
30.104(19)(a)10	30.807	Required certification concerning safety of treatability studies.	<input type="checkbox"/>	<input type="checkbox"/>
			Comments and/or Notes	
30.104(19)(a)11		Documentation of proper notification to local officials.	<input type="checkbox"/>	<input type="checkbox"/>
			Comments and/or Notes	
30.104(19)(d)		Documentation that testing facility conducting treatability study has an EPA ID number	<input type="checkbox"/>	<input type="checkbox"/>
			Comments and/or Notes	
		Briefly, restate the sections listed on this page, and the applicant's intention to comply.	<input type="checkbox"/>	<input type="checkbox"/>
			Comments and/or Notes	
30.104(19)(e)			<input type="checkbox"/>	<input type="checkbox"/>
			Comments and/or Notes	
30.104(19)(f)			<input type="checkbox"/>	<input type="checkbox"/>
			Comments and/or Notes	
30.104(19)(g)			<input type="checkbox"/>	<input type="checkbox"/>
			Comments and/or Notes	
30.104(19)(h)			<input type="checkbox"/>	<input type="checkbox"/>
			Comments and/or Notes	
30.104(19)(i)			<input type="checkbox"/>	<input type="checkbox"/>
			Comments and/or Notes	
30.104(19)(j)			<input type="checkbox"/>	<input type="checkbox"/>
			Comments and/or Notes	
30.104(19)(k)			<input type="checkbox"/>	<input type="checkbox"/>
			Comments and/or Notes	



Massachusetts Department of Environmental Protection
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Treatability Studies Checklist

Application Requirements	310 CMR 30.000 Reference Section	Subject Requirements	Provided	Location Application
			<input type="checkbox"/>	<input type="checkbox"/>
30.104(19)(l)				
			<hr/> Comments and/or Notes	
			<input type="checkbox"/>	<input type="checkbox"/>
30.104(19)(m)				
			<hr/> Comments and/or Notes	
			<input type="checkbox"/>	<input type="checkbox"/>
30.104(19)(n)				
			<hr/> Comments and/or Notes	
			<input type="checkbox"/>	<input type="checkbox"/>
30.104(19)(o)				
			<hr/> Comments and/or Notes	